

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	BTF	70385	
O.I.P.E. CLASSIFIER		8	01-14-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		60500	2-9

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	✓	6/11/00
2	✓	✓	12-18-02
3	✓	✓	6/11/00
4	✓	✓	6/11/00
5	✓	✓	6/11/00
6	✓	✓	6/11/00
7	✓	✓	6/11/00
8	✓	✓	
9	✓	✓	
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If more than 150 claims or 10 actions  
staple additional sheet here

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